## **RecoveryBlog - A BLOG FOR RECOVERY ADVOCATES!**

November 30, 2018

## Intergenerational Healing: Recognition, Resistance, Resilience, and Recovery

byBill White and Don Coyhis



Essentially, it is thought that the negative effects emanating from group trauma experiences are not only transferred across generations, but that these effects accumulate, such that events occurring at different points in history are part of a single traumatic trajectory.—Amy Bombay, Kimberly Matheson, and Hymie Anisman

Wakiksuyapi, those carrying the historical trauma, can transcend trauma through a collective survivor identity and a commitment to traditionally oriented values and healing. Maria Yellow Horse Brave Heart

Historical trauma and historical unresolved grief (as that experienced in the Jewish Holocaust, in the genocidal and cultural wars against the Indigenous tribes of North America, and in the historical enslavement of African peoples) are recently introduced concepts that convey the enduring effects of mass disconnection from culture, family, and self (Brave Heart, 2000).

Historical adversity, such as that currently underway in Syria, involves the simultaneous experience of mass deaths, loss of homeland, dislocation and dispersion, economic hardship and exploitation, abandonment by the world community, and the resulting destruction of family/cultural ties and identity-shaping stories. Such trauma involves a colonization of homeland and culture and can also involve a colonization of the mind.

Research on historical trauma underscores the potential intergenerational effects of such adversity upon individuals, families, and cultures, particularly when remnants of institutional violence and oppression remain in the emerging social, political, and economic environment. Recent studies of survivors of the Jewish holocaust and survivors of Indian Boarding Schools vividly reveal how the effects of historical trauma can amplify the effects of contemporary stressors across generations and be manifested through increased rates of guilt, depression, suicidality, substance use disorders, aggression, pessimism, apathy, sleep disorders, and interpersonal conflicts.

The mechanisms of such intergenerational transmission have been extensively catalogued and span multiple dimensions. Physiological mechanisms include the transmission of trauma and stress vulnerability via epigenetic inheritance. Psychological mechanisms include the collective memory of and preoccupation with traumatizing events or a shared "conspiracy of silence" related to such events, amplification of responses to current injustices, survivor guilt, self-blame, increased risk for personal trauma, low self-esteem, internalized aggression, and enhanced risks from self-medication. Social mechanisms of transmission include the disruption of family, extended family, and kinship networks; loss of positive cultural identity; suppression of cultural coping styles and rituals; lack of parental role models; impaired parenting across generations; and potential enmeshment in subcultures (e.g., drug, criminal) that undermine personal hardiness. Religious mechanisms include the loss of religious traditions and healing rituals and vulnerability to charismatic cults. Political and economic mechanisms include political and economic marginalization and the loss of personal and tribal agency.

Collectively, these factors can create a snowball effect of stress proliferation and impaired coping capacities across generations, including the intergenerational transmission of alcohol and other drug problems and their progeny of related problems. But history does not dictate personal or collective destiny. Recent research on historical trauma reveals the capacity to transcend such effects through open acknowledgement of the traumatizing events, restorative justice (cultural acts of apology and restitution), forgiving the unforgivable, rituals of inter-group healing, and intra-cultural strategies aimed at intergenerational resistance, resilience, and recovery. The story of historical trauma is incomplete and is itself wounding if it fails to include the elements of survival, strength, and the potential for healing and health in spite of prolonged adversity. This brief essay will focus on these healing processes that tend to unfold in four overlapping stages.

Intergenerational recognition is a breakthrough of awareness of the links between the past, present, and future. Recognition involves full admission and acceptance of prevailing problems and their interconnection, a new vision of solutions, and discovery of the laws of change that govern the journey from problems to solutions. Recognition involves the discovery that solutions lie both within the self, family, community, and culture and in the mobilization of resources between and beyond these realms. Resistance, resilience, and recovery begin with processes of truth-seeking and truth-telling across the generations.

Intergenerational resistance is a culturally-, politically-, economically-, and religiously-aware refusal to continue family and tribal legacies of alcohol and other drug problems. It is a refusal to expose oneself to that risk. It is a personal declaration, "Here it stops!" Addictive disorders result from a collision of vulnerability and exposure. Resistance is the conscious refusal to be exposed.

Intergenerational resilience is a refusal to develop a severe alcohol or other drug problem following alcohol or other drug use exposure. It is an assertion of health in the face of adversity and risk, e.g., a drug-saturated family and social environment. It is the embrace of alternative styles of coping and an alternative identity. It is the conscious mobilization of internal and external resources to neutralize the mechanisms through which intergenerational alcohol and other drug problems are transmitted. It is the advent of new personal and family traditions of coping and health. Intergenerational resilience is the process of aborting alcohol and other drug problems before they have an opportunity to fully develop.

Intergenerational recovery involves initiating or sustaining a family history of recovery to break intergenerational cycles of alcohol and drug and related problems. It is the unequivocal admission of one's own problems within a larger historical context and a sustained commitment to enhance intergenerational health and positive connection to community. It is a personal declaration that this new tradition starts with me!

In the face of historical trauma and historical unresolved grief, manifested in generations of alcohol and other drug related problems, we have observed seven steps essential to promoting intergenerational recognition, resistance, resilience, and recovery for individuals, families, and communities.

Awakening and Collective CommitmentThere is a period of consciousness-raising through which new stories (oral histories) arise that acknowledge prolonged AOD problems and place them in their larger historical trajectory. New and renewed leaders voice unspeakable truths framed in a message of hope for the future and a vision of how to create such a future. The healing vision of the future extends to the seventh generation. "I stories" of injury and healing (personal narratives) are reframed through a new and larger "we story" of injury and healing (collective story of a people). Anger, guilt, shame, and fear are openly acknowledged. Personal and collective survival are extolled and rendered heroic—tapping new strength within and beyond personal and tribal identities. In light of these truths, drinking and drug use are framed as forms of personal and cultural capitulation/suicide; sobriety is framed as an act of personal, family, and cultural resistance and a strategy of survival and protection of oneself, one's family, and one's culture. The personal healing of historical trauma requires escaping one's own encapsulation and standing with others in a cultural circle.

Mass Mobilization There is a call to action that reaches the hearts of the people, first in small numbers and then in every-increasing waves. Personal self-consciousness gives way to a new collective consciousness and commitment to action. The expansion of resources for healing self and family are extended to visions of a healed community and a healed history. A revitalized culture is birthed via history, language, symbols, art, literature, music, and ritual. Collective identity solidifies into awareness that new activities constitute a potentially historic movement. Personal and family identities are strengthened by this renewed cultural identity.

Personal and Collective Mourning The past is mourned so that a future can be forged. Tears must wet the early trail of new beginnings. The sites of past trauma are revisited. Rituals of personal and collective grief are created and repeated so the unspeakable past is never forgotten. Injuries

of the past are linked to continued injuries in the present, as well as awareness that inherited styles of coping may not fit new realities. The wounds of men, women, and children are distinctive, creating the need for them to heal separately before they can heal together.

Forgiving the Unforgivable To move beyond the enduring wounds of the unspeakable past and its contemporary legacies, ways must be found to forgive the unforgivable. Self-destructive rage over past injury must give way to healing across the boundaries of victim grief and perpetrator guilt. (We become what we carry!) The heart of the perpetrator must be found within the heart of the victim; the heart of the victim must be found within the heart of the perpetrator. Forgiveness of others begins with forgiveness of self.

Achieving a New Harmony. Historical balance between the peoples is achieved through acts of restitution and new rituals of reconciliation. Mechanisms of restorative justice are explored and acted upon. Without acts of, and the experience of, justice; replicating cycles of the past cannot give way to new forms of relationships. We-they polarizations give way to a larger understanding of the human family. Interpersonal contacts between cultures increase exponentially and are ritualized and harmonized.

Acts of Empowerment, Service, and AdvocacyThere is a mass transformation of helpees into helpers. The wounded are rechristened as healers and charged with the responsibility of sharing their resilience and recovery (experience, strength, and hope) stories with others. Personal dependence (isolation and victim-stance) gives way to mutual dependence (restoration of an ethic of collaboration and community service). Mutual help through the sharing of stories is an act of service, but also assures cultural continuity—a ritual that is as much cultural communion as communication. Collective action, in the form of political advocacy, becomes a ritual of personal and cultural empowerment—a positive antidote to internalized anger and apathy.

Cultural Revitalization Cultural development begun in the stage of mass mobilization takes on increased attention and depth, including expansion of historical research; language reclamation and purging of stigma-laden words and images; embrace of ancestral and new rituals; adoption of ancestral forms of self-presentation via hair, dress, jewelry; culture-laden art, theatre, and film; and expressive styles of music and dance. A stage of community building is evident in new and revitalized institutions, emboldened by sober leadership, that support the health of individuals, families, and the community. Collectively, this revitalized culture and these support institutions constitute a healing forest that mends the wounds of the people and frees their capabilities.

Acts of Celebration Ancestral community ceremonies (gatherings, memorials, communal rituals, power songs, dances) are renewed and new ceremonies are birthed that celebrate cultural survival and vitality. Kinship bonds are strengthened. Cultural values of survival are elevated and extolled through acts of storytelling. Stories of suffering are transformed through a process of cultural alchemy into stories of heroic survival and strength. Connections between youth and elders are strengthened by the transmission of historical memory and through mutual identification. Problem visibility is replaced by celebration of personal, family, and community solutions. The public nature of these celebrations also progressively alters how communities view those who have experienced historical trauma. A new empowering narrative revealed in

these events alters perception of self and one's own culture and also alters how one and one's community are perceived by others, shedding legacies of stereotypes, stigma, discrimination, and personal shame.

The seven processes above are critical to the promotion of intergenerational recognition, resistance, resilience, and recovery across diverse communities and cultural contexts. Such processes are a reaffirmation of the inextricable link between personal and community health as set forth in The Red Road to Wellbriety: "...the individual, family, and community are not separate; they are one. To injure one is to injure all; to heal one is to heal all."

## Of Potential Interest

Bombay, A., Matheson, K., & Anisman, H. (2011). The impact of stressors on second generation Indian Residential School survivors. Transcultural Psychiatry, 48(4), 367–391.

Bonnano, G.A. (2004). Loss, trauma, and human resilience: Have we underestimated the human capacity to thrive after extremely aversive events? American Psychologist, 59(1), 20-28.

Brave Heart, M. (1993). The historical trauma response among Natives and its relationship with substance abuse: A Lakota illustration. Journal of Psychoactive Drugs, 35(1), 7–13.

Brave Heart, M. Y. H., & DeBruyn, L. M. (1998). The American Indian Holocaust: Healing historical unresolved grief. American Indian and Alaska Native Mental Health Research, 8(2), 56–78.

Coyhis, D. (2011). The Wellbriety Movement Comes of Age. Colorado Springs, CO: Coyhis Publishing.

Coyhis, D., & White, W. (2003) Alcohol problems in Native America: Changing paradigms and clinical practices. Alcoholism Treatment Quarterly, 3/4:157-165.

Coyhis, D., & White, W. (2006). Alcohol Problems in Native America: The Untold Story of Resistance and Recovery-The Truth about the Lie. Colorado Springs, CO: White Bison, Inc.

Denham, A. R. (2008). Rethinking historical trauma: narratives of resilience. Transcultural Psychiatry, 45(3), 391–414.

Kirmayer, L. J., Dandeneau, S., Marshall, E., Phillips, M. K., & Williamson, K. J. (2011). Rethinking resilience from indigenous perspectives. Canadian Journal of Psychiatry, 56(2), 84–91.

Sigal, J. J. (1998). Long-term effects of the Holocaust: Empirical evidence for resilience in the first, second, and third generation. Psychoanalytic Review, 85(4), 579–585.

Post DateApril 15, 2016 by Bill White

CategoriesArticles

Tagsaddiction | cultural renewal | Intergenerational | recognition | recovery | resilience | resistance | trauma

William ("Bill") White Emeritus Senior Research Consultant at Chestnut Health System Recovery Historian

Read all of Bill White's Blog Posts on his website here www.williamwhitepapers.com